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PATENT  
Attorney Docket 2516.STS.CN

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Richard K. Squires

SERIAL NO.: 10/795,805

FILED: March 8, 2004

FOR: TURBO SYSTEM AND METHOD  
OF INSTALLING

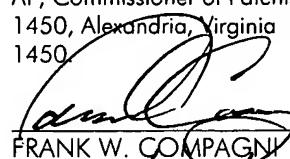
ART UNIT: 3748

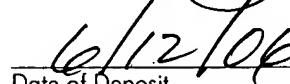
EXAMINER: Trieu, Thai Ba

DOCKET NO.: 2516.STS.CN

CERTIFICATE OF DEPOSIT UNDER 37  
C.F.R. § 1.8

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AMENDMENT AFTER FINAL

MAIL STOP AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Sir:

In response to the Office action mailed on April 10, 2006, the applicant submits the  
following amendments and remarks.



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**TRANSMITTAL  
FORM**

*(to be used for all correspondence after initial filing)*

		Application Number	10/795,805
		Filing Date	March 8, 2004
		First Named Inventor	Richard K. Squires
		Group Art Unit	3748
		Examiner Name	Thai Ba Trieu
Total Number of Pages in This Submission (including this sheet)	8	Attorney Docket No.	2516.STS.CN

ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Amendment / Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Appeal Communication: <input type="checkbox"/> Appeal Notice <input type="checkbox"/> Appeal Brief <input type="checkbox"/> Reply Brief  <input type="checkbox"/> Assignment with Cover Sheet  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Check in the amount of \$_____  <input type="checkbox"/> Credit card authorization in the amount of \$_____  <input type="checkbox"/> Declaration & Power of Attorney  <input type="checkbox"/> Drawings ____ sheets (Replacement Sheets) <input type="checkbox"/> Formal <input type="checkbox"/> Informal	<input type="checkbox"/> Extension of Time Request ____ month  <input type="checkbox"/> Fee Calculation Table  <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form 1449 <input type="checkbox"/> Copies of IDS References  <input type="checkbox"/> Issue Fee Transmittal & Advance Order	<input type="checkbox"/> Maintenance Fee Transmittal ____ year  <input type="checkbox"/> Missing Parts Response  <input type="checkbox"/> Notification of Change of Attorney Address & Docket Number  <input checked="" type="checkbox"/> Return Postcard  <input type="checkbox"/> Revocation & Power of Attorney  <input type="checkbox"/> Status Inquiry  <input type="checkbox"/> Other:	
Remarks			

**SIGNATURE OF APPLICANT, ATTORNEY OR AGENT**

Attorney for Applicant	Frank W. Compagni, Registration No. 40,567 MORRISS O'BRYANT COMPAGNI, P.C. 136 South Main Street, Suite 700 Salt Lake City, Utah 84101 (801) 478-0071 telephone; (801) 478-0076 facsimile		
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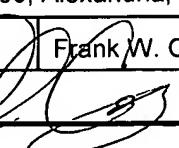
Signature			
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Date

6/12/06

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Typed or Printed Name	Frank W. Compagni		
Signature			

Date

6/12/06